USE THIS FORM FOR ALL ENTRIES EXCEPT CRAFTS THE CLEVELAND MUSEUM OF ART Born in Cleveland YES NO FORTY-NINTH ANNUAL EXHIBITION OF WORK BY ARTISTS AND CRAFTSMEN OF THE WESTERN RESERVE Entered Previous May Shows? YES MAY 3 to JUNE 18, 1967 Collaborator if any _ Address 1765 COLLAPSEN R.D. Out—of—town residents should state whether return shipment is required. The No Please bring Registration Fee of \$2.00 (Cash or Check) with your entries. MEDIUM FFINTING MEDIUM CL ASS CL ASS CL ASS MEDIUM TITLE TITLE TITLE DESCRIPTION DESCRIPTION DESCRIPTION OFOBJECT OFOBJECT OFOBJECT NUMBER NUMBER IN NUMBER NUMBER IN NUMBER FOR EDITION FOR FOR EDITION. PRICE EDITION PRICE SALE (GRAPHIC PRTS.) SALE (GRAPHIC PRTS.) (GRAPHIC PRTS.) Artist FIRST NAME LAST NAME FIRST NAME LAST NAME

ACCEPTED

DO NOT WRITE IN THIS SECTION

REJECTED

This entry blank must be fully made out (typewritten or plainly lettered for catalog purposes) and signed. Unsigned entry blanks will not be accepted.

Note calendar for delivery and return of objects carefully. It is understood that the Museum will have the right to dispose for its own account any entry not called for by July 25, 1967.

It is also understood that accepted entries will remain on exhibition until June 18 1967.

The submission of entries will be construed as acceptance of all conditions printed in this entry blank.

SUBMIT ENTRIES WITH ENTRY BLANK AND FEE MARCH 11 THROUGH MARCH 18, 1967.

ACCEPTED

DO NOT WRITE IN THIS SECTION

REJECTED

Submit one entry blank in triplicate per person. One copy, complete with juror's marks, will be returned to you as notification of acceptance or rejection. THIS COPY IS YOUR ONLY RECEIPT TO CLAIM YOUR ENTRIES. Do not lose it.

This form in duplicate is made up of N C R paper which does not require carbon.

pp

1/ SIGNATURE

REJECTED

ACCEPTED

DO NOT WRITE IN THIS SECTION

REJECTED: May 6 - May 20

ACCEPTED: June 23 - July 8